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## **FACSIMILE TRANSMISSION COVER SHEET**

Date: **December 2, 2005**

To: **MAIL STOP AF**

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Examiner: **Neveen Abel Jalil**

From: **Sean McDermott**

Customer No: **29855**

Client/Matter: **149-0046US**

Serial No.: **09/990,770**

Re: **NOTICE OF APPEAL**

Pages (including cover page): **4**

**Received in the United States Patent and Trademark Office**

- Transmittal Form (1-page);
- Notice of Appeal (1-page);
- Duplicate copy of Notice of Appeal (1-page).

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PTO/SB/21 (09-04)

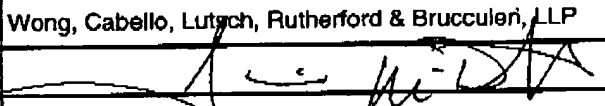
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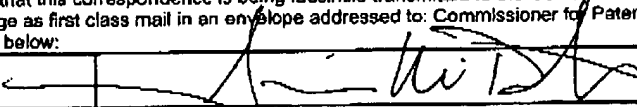
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/990,770
	Filing Date	November 21, 2001
	First Named Inventor	Melody Vos
	Art Unit	2175
	Examiner Name	Neveen Abel Jalil
	Attorney Docket Number	149-0046US
Total Number of Pages in This Submission	3	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Wong, Cabello, Lutsch, Rutherford & Brucculeri, LLP		
Signature			
Printed name	Sean McDermott		
Date	December 2, 2005	Reg. No.	49,000

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Signature			
Typed or printed name	Sean McDermott	Date	December 2, 2005

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) <b>149-0046US</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <u>Dec. 2nd, 2005</u>		In re Application of <b>Database Management System and Method</b>	
Signature: <u>[Signature]</u>		Application Number <b>09/990,770</b>	Filed <b>21 November 2001</b>
Typed or printed name <u>Sean McDermott</u>		For <b>Melody Voss</b>	
		Art Unit <b>2165</b>	Examiner <b>Neveen Abel Jalil</b>
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ <u>500.00</u>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ _____	
<input type="checkbox"/> A check in the amount of the fee is enclosed.		12/05/2005 TL0111 00000050 501922 09990770	
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		01 FC:1401 500.00 DA	
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>501922 (149-0046US)</u> . I have enclosed a duplicate copy of this sheet.			
<input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.			
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I am the		<u>[Signature]</u> Signature	
<input type="checkbox"/> applicant/inventor.		<u>Sean McDermott</u> Typed or printed name	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>49,000</u>		<u>832-446-2416</u> Telephone number	
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		<u>Dec. 2, 2005</u> Date	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of <u>2</u> forms are submitted.			

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